

**Virginia Department of Fire Programs
Division of Training and Operations
Equipment Request Usage Form**

Please use this form when requesting equipment usage for an approved class. After you have completed the form, submit to the VDFP Division Office in which the school was originally requested.

Date: _____ Approved School # _____

Name of Requestor: _____

Address: _____

Daylight telephone contact: _____

FAX Contact: _____

Date equipment needed: _____

Type of equipment requested: _____

Location equipment will be used: _____

Return date if not specified by Division Manager: _____

Responsible jurisdiction: _____

Please complete completed request form to the Division Office approving this course. Every effort will be made to fill your request if items requested are available.

I understand the requestor and/or responsible jurisdiction listed on this document will be responsible for fixing or replacing any damaged equipment while being used for the approved course. Upon return, the equipment will be inspected and placed back into available cache for future classes.

Requestors Signature

Date

For office use only

Request Approved: _____ Denied: _____

Division Manager Signature: _____ Date: _____